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SEC 1972 Potential persons who are to respond to the collection of information contained in this form (6-02) are not required to respond unless the form displays a currently valid OMB control number.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SECURITIE

SECURITIES AND EXCHANGE COMMISSION CESSED
Washington, D.C. 20549

JUN 2 5 2007

THOMSON FINANCIAL OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

FORM D

**UNITED STATES** 

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEI	VED			

L	
Name of Offering ([] check if this is an amendment and name has changed, and indicate change.	)
INTECH Global Core Fund LLC	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6)	[ ] ULOE
Type of Filing: [ ] Filing [ X ] Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change.)	
INTECH Global Core Fund LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number	(Including Area Code)
151 Detroit Street, Denver CO 80206 (303) 333-3863	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telepho (Including Area Code) (if different from Executive Offices) same	ne Number

Brief Description of Business

To operate and carry on the business of a private investment trust.

Type of Business Organiz [ ] corporation	zation [ ] limited partnership, already formed [ X] other (please specify):
[] business trust	[ ] limited partnership, to be formed limited liability company
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [07] [2006] [X] Actual [ ] Estimated
Jurisdiction of Incorporation	on or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction) [D][E]

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

# State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Form D				
Check Box(es) that Apply:	[X] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[ ] Director [ ] General and/or Managing Partner	
Full Name (Last name			r dianol	
	ce Address (Number and Street Denver, CO 80206-4928	t, City, State, Zir Coo	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director [ ] General and/or Månaging Partner	
Full Name (Last name Frost, Gregory A.	e first, if individual)			
	ce Address (Number and Stree Denver, CO 80206-4928	t, City, State, Zip Coo	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executiv.	[ ] Director [ ] General and/or Managing Partner	
Full Name (Last name Hardin, Heidi	e first, if individual)			
	ce Address (Number and Stree Denver, CO 80206-4928	t, City, State, Zip Coo	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director [ ] General and/or Managing Partner	
Full Name (Last name Iseman, Andrew	e first, if individual)			
	ce Address (Number and Street Denver, CO 80206-4928	t, City, State, Zip Cod	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director [ ] General and/or Managing Partner	
Full Name (Last name Lao, Frank R.	e first, if individual)			
	ce Address (Number and Stree Denver, CO 80206-4928	t, City, State, Zip Cod	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive: Officer	[ ] Director [ ] General and/or Managing Partner	
Full Name (Last name Nergaard, Jesper	e first, if individual)			
	ce Address (Number and Stree Senver, CO 80206-4928	t, City, State, Zip Coo	de)	

Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last name Rosenberg, Michelle				
	ce Address (Number and Street, Denver, CO 80206-4928	City, State, Zir Cod	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Swift, Jack	e first, if individual)			
	ce Address (Number and Street, Jenver, CO 80206-4928	City, State, Zic Co	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[X] Executiv∋ Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam Zimmerman, John	e first, if individual)			
	ce Address (Number and Street, Denver, CO 80206-4928	City, State, Zip Co	de)	
Check Box(es) that Apply:	[ ] Promoter [X] Beneficial Owner	[] Executive: Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last name Metal Trades Brance)	e first, if individual) h Local 638 Pension Fund			
Business or Residence 5 Penn Plaza, 21 <sup>st</sup> F	ce Address (Number and Street, loor, New York, NY 10001	City, State, Zip Co	de)	
Check Box(es) that Apply:	[ ] Promoter [X] Beneficial Owner	[] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last name Steamfitters Industr				
	ce Address (Number and Street,	City, State, Zip Coo	de)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

 $Form \ D$ 

	<del></del>				B. IN	IFORMA	TION A	BOU1. OI	FFERING	<u> </u>	_	, , , , , , , , , , , , , , , , , , , ,
	the iss		, or does	s the iss	uer inter	nd to sell	, to non-	accredite	d investo	ors in this	Yes	No [ <b>X ]</b>
			Ansv	ver also	in Appe	ndix, Col	lumn 2, i	f filing un	der ULO	E.		
		minimu		tment th	at will be	e accepte	ed from a	any			\$15,0	00,000.00
3. Do	es the of	ffering p	ermit joi	nt owne	rship of a	a single ı	unit?	••••••			Yes [X]	No [ ]
directlin con assoc state disted	y or indi nection iated pe or states are asso	rectly, a with sale rson or s, list the ociated p	iny commes of second agent of a contract the commes of the	mission of curities in a broke of the broke of the broke of such	or simila n the off r or dea oker or d	r remune ering. If a ler regist lealer. If	eration for a person ered with more that	or solicita to be list the SEG an five (5	tion of puted is an C and/or persons			
					of its sl		oes not	intend t	o pay an	y commi	ssion o	r similar remuneration
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Name	of Asso	ociated E	Broker o	r Dealer								
States	in Whic	ch Perso	n Listed	Has So	licited o	r Intends	to Solic	it Purcha	sers	:		
(Chec	k "All	States"	or chec	k indiv	idual St	ates)		••		[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA.]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[WV]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
				individua								
Busin	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)	<del></del>	<del></del>	
Name	of Asso	ciated E	Broker o	r Dealer								
								it Purcha	sers			
(Chec	k "All	States"	or chec	k indiv		ates)		••		[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT) (RI)	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND  [WA]	[OH]	[OK] [WI]	[OR] [WY]	(PA) [PR]
Full N	ame (La	ist name	e first, if	individua	al)				<del></del>		_	
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	 City, Stat	e, Zip Co	ode)			

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Name of Associated Broker or Dealer

										<u></u>		
States	s in Whic	h Perso	n Listed	l Has So	licited o	r Intends	to Solic	it Purcha	sers			
(Chec	k "All s	States"	or chec	k indiv	idual St	ates)		••		[	] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC:]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[NC:]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[W.\]	[WV]	[WI]	[WY]	[PR]
	· ·	(Us	e blank	sheet, c	г сору	and use	additio	nal copie	s of this	s sheet, a	s nece	ssary.)
		C. OFF	ERING	PRICE,	NUMBE	ER OF IN	IVESTO	RS, EXP	ENSES	AND USE	OF PR	OCEEDS
and the sthe co	ne total a transacti	mount a on is an elow the	already s exchan	sold. Ent ige offer	er "0" if ing, che	answer i	is "none" ox " and	is offering or "zero. indicate i change a	n			
Т	ype of S	Security								gregate ring Price		int Already Sold
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		[	] Com	mon	[ ] P	referred						
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C	Other (Sp	-								AV*		99,905.74
							•••••		\$		_\$	
	*Shares Answ						nder ULC	E.				
purcha their p persor	ased sec ourchase ns who h ir purcha	curities i s. For o nave pur	n this of fferings chased	fering ar under <u>R</u> securitie	nd the agule 504, es and the	ggregate indicate ne aggre	dollar ar	ar am our	f			
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<b>1</b>										0	_ \$	0
		_					nder ULC		-	N/A	_	N/A
inform offerin sale o	ation red igs of the	quested e types i	for all sindicated	ecurities d, the tw	sold by elve (12	the issu ) months	enter the er, to dat s prior to type liste	te, in		N/A		

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		_\$
Regulation A		\$
Rule 504		\$
Total		\$
		,
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees  Engineering Fees  Sales Commissions (specify finders' fees separately)  Other Expenses (identify)  Total		[]\$_0 []\$_0 []\$_0 []\$_0 []\$_0 []\$_0 []\$_0
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question difference is the "adjusted gross proceeds to the issuer."	4.a. This used any	
proceeds to the issuer set forth in response to Part C - Question 4.b above	e.	
•	Payments	
	to	
	Officers,	
	Directors,	
		Payments To
	Affiliates	
Salaries and fees	[]\$_0	
Purchase of real estate	[]\$ <u>0</u>	( ] \$ <u> </u>
Purchase, rental or leasing and installation of machinery and equipment	[]\$ <u>0</u>	[]\$ <u></u> 0
Construction or leasing of plant buildings and facilities	[]\$ <u> </u>	[]\$ 0
Acquisition of other businesses (including the value of	1 1 <del>4</del>	*

Column Totals .....

securities involved in this offering that may be used in

Working capital .....
Other (specify): Purchase Investment Securities

Total Payments Listed (column totals added) .....

[X] ]\$<u>38,599,905.74</u>

[]\$<u>0</u> []\$<u>0</u>

[]\$<u>0</u> []\$<u>0</u>

[]\$<u>0</u> []\$<u>0</u>

[]\$\_0

[X]\$<u>38,599,905.74</u>

[X]\$<u>38,599,905.74</u>

[]\$\_0

[]\$<u>0</u>

[]\$\_\_0

# D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature /	Date
INTECH Global Core Fund LLC	Okidi Bardin	6/13/07
Name of Signer (Print or Type) Heidi Hardin	Title of Signer (Print or Type) Vice President	

 ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18
U.S.C. 1001.)